24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Mayday PAC	
	C C00562587
Check if X 24-hour report 48-hour report New report Amends report filed	I on M M M / D D / Y B Y B Y B Y
Full Name of Payee	Date of Public Distribution/Dissemination
Fletcher Rowley	10 24 7 2014
Mailing Address 1720 W End Ave	Amount
Ste 630	1250.00
City State Zip Code Nashville TN 37203-2607	1250.00 Transaction ID: VNV0C9Q9MQ5 Date of Disbursement or Obligation
Purpose of Expenditure TV and Digital Ad Production Costs Category/ Type	10 24 7 2014
Name of Federal Candidate Support Offic	e Sought: House District: 00
Marion Michael Rounds Oppose	President Senate State: SD
Calendar Year-To-Date Per Election for Office Sought Disb. 2014	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	Amount
	Allouit
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General
	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	1250.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	1250.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
	10 25 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	